FORM 4	4
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Check this box if no				
longer subject to				
Section 16. Form 4 or				
Form 5 obligations				
may continue. See				
Instruction 1(b).				

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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02)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)										
1. Name and Address of Reporting P MARIO ERNEST	2. Issuer Name and Ticker or Trading Symbol Tonix Pharmaceuticals Holding Corp. [TNXP]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			
(Last) (First) C/O TONIX PHARMACEUTI HOLDING CORP., 509 MADI SUITE 306	3. Date of Earliest Transaction (Month/Day/Year) 06/25/2018						Officer (give title below) Other (specify below)			
(Street) NEW YORK, NY 10022	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City) (State)	Table I - Non-Derivative Securities Acqu						uired, Disposed of, or Beneficially Owned			
1. Title of Security (Instr. 3)	Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)		on 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Direct (D)	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock, \$0.001 par value	06/25/2018		Р		16,500	А	\$ 4.48 <u>(1)</u>	50,000	Ι	By Ernest and Mildred Mario Revocable Trust

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information SEC 1474 (9contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.1	Numbe	6. Date Exe	rcisable	7. Tit	tle and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	ı of		and Expiration Date		Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	De	rivative	(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	See	curities			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Ac	quired			(Instr	: 3 and		Owned	Security:	(Instr. 4)
	Security				(A)) or			4)			Following	Direct (D)	
					Dis	sposed						Reported	or Indirect	
					of	(D)						Transaction(s)	(I)	
					×	str. 3,						(Instr. 4)	(Instr. 4)	
					4, ;	and 5)								
										Amount				
							Data	Environtion		or				
							Date Exercisable	Expiration	Title	Number				
							Exercisable	Date		of				
				Code V	(A	.) (D)				Shares				

Reporting Owners

Describer Ocean Name (Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
MARIO ERNEST C/O TONIX PHARMACEUTICALS HOLDING CORP. 509 MADISON AVENUE, SUITE 306 NEW YORK, NY 10022	Х					

Signatures

/s/ Jessica Morris, Attorney-in-Fact	06/27/2018
**Signature of Reporting Person	Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$4.46 to \$4.52 per share, (1) inclusive. The reporting person undertakes to provide to Tonix Pharmaceuticals Holding Corp. ("Tonix"), any security holder of Tonix, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth herein.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.